DOCUMENT RESUME

ED 232 072 CG 016 766

AUTHOR Bailey, Bruce E.; Hernandez, Alexis
TITLE Projected Suicidal Ideation in Regard to Adverse Life Circumstances.
PUB DATE Nov 82
NOTE 20p.; Paper presented at the Annual Meeting of the Texas Psychological Association (Dallas, TX, November 4-6, 1982).
PUB TYPE Reports - Research/Technical (143) -- Speeches/Conference Papers (150)

EDRS PRICE MF01/PC01 Plus Postage.
DESCRIPTORS Age Differences; *Children; College Students; Comparative Analysis; Depression (Psychology); Emotional Disturbances; Higher Education; *High Risk Persons; *Research Methodology; Sex Differences; *Suicide
IDENTIFIERS *Ideation

ABSTRACT

Despite the importance of suicide as a leading cause of death in the United States, there is a lack of empirical research regarding causes and associated factors. In order to explore an indirect research methodology which might have applicability to understanding children's suicide risk, 286 college students (173 females, 113 males) responded to stories about characters of different ages, naming three things each character might be thinking of doing. Data analyses indicated that the methodology was effective in eliciting responses which reflected suicidal ideation. Subjects projected suicidal ideation onto the characters based the characters' on age. Teenagers were seen as more likely to commit suicide than members of other age groups. Sex of character had no significant effect upon responses. Males and females appeared to view adverse circumstances differently, with females more likely than males to propose effective coping responses. Qualitative assessment of the responses indicated that, although nearly 60% of the characters were seen as considering suicide, less than 1% were seen as considering counseling or therapy. Sample stories about three male characters are appended. (Author/AG)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

ED232072

Projected Suicidal Ideation in Regard to Adverse Life Circumstances

Bruce E. Bailey, Ph.D.
Stephen F. Austin State University

Alexis Hernandez, M.A.
University of Nebraska

CG 016766

U.S. DEPARTMENT OF EDUCATION
NATIONAL INSTITUTE OF EDUCATION
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

X This document has been reproduced as received from the person or organization originating it.

☐ Minor changes have been made to improve reproduction quality.

• Points of view or opinions stated in this document do not necessarily represent official NIE position or policy.

"PERMISSION TO REPRODUCE THIS MATERIAL HAS BEEN GRANTED BY

Bruce E. Bailey

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)."

ABSTRACT

Suicide is the 11th leading cause of death in the U.S. and the second leading cause of death for youths age 15-18. Despite the importance of suicide, empirical research regarding causes and associated factors is notably insufficient. This is particularly true in regard to our understanding of the suicide risk of children. The purpose of this study was to explore a methodology which would have applicability to understanding children's suicide risk. An indirect methodology was decided upon because of ethical and risk problems related to direct assessment of children's thinking regarding suicide. The method involves the degree to which suicidal ideation is projected onto characters suffering various adverse life circumstances. To assess the usefulness of this methodology 286 college students were tested. Based on the subjects' responses the method appeared to be useful. Also of interest was the finding that the subject's projected suicidal ideation did not match epidemiological data regarding suicide. Additionally, males and females appeared to view adverse circumstances differently with females more likely to propose effective coping responses. Lastly, there were indications that professionals should work to make persons in adverse circumstances more aware of their availability and to improve accessability in regard to service provision.

Projected Suicidal Ideation in Regard to
Adverse Life Circumstances

Suicide is a pandemic problem. Persons from all social, age and national groups are vulnerable to the possibility of suicide. Epidem ological data provides us information which indicates that this risk differs as the result of an array of interacting factors; nevertheless, no group is immune to suicide. Despite the importance of suicide, empirical reseach regarding causes and associated factors is notably insufficient. The purpose of the research project summarized in this paper was to add to the body of knowledge related to suicidal risks. More specifically, the focus was to explore factors associated with suicidal ideation.

Intentionality is a key element of most definitions of suicide. That is, the person must have intended to take his/her own life or at least must have purposely put himself in mortal danger, in order for his behavior to be classified suicidal. Given this framework a necessary precursor of suicide must be a person's contemplation of suicide and/or her/his voluntary engagement in high risk behavior that she initiates so that she may come to significant harm.

One of the areas where a great deal of controversy exists in regard to intentionality is in relationship to autolethal behavior of children. Young children have a number of misconceptions concerning death: it is simply a temporary separation, it is reversible, it is denied, it is only accepted figuratively, etc. (Ausubel and Sullivan, 1970). Because children under nine years do not have an accurate conception of death, a number of writers have argued that these children cannot be assessed as capable of suicide. That is, if they do not understand death, in the adult interpretation of this concept, then they cannot intend to die; and therefore, cannot commit suicide. If all of this appears to stretch the imagination a bit, we should keep in mind it

has only been in the past 20 years in which we have come to accept the concept that children under nine years can be depressed (Toolan, 1981). Basically, it has been stated that there can be no depression in children because depression is a superego phenomenon, and children do not have a sufficiently well-developed superego (Rochlin, 1959). Our lack of recognition that children can become depressed, like arguments that children lack intentionality in regard to self-destructive behavior, is important because it leads to our not appreciating the potential for suicide in our children.

A further example of our lack of recognition of depression in children relates to psychiatric diagnosis. Neither DSM I nor DSM II even mention the subject of childhood depression. Even today, in our enlightened time, the 1980 edition of the Diagnostic and Statistical Manual for Mental Diseases - DSM III only begrudgingly recognizes depression in children. Even then this recognition occurs in the adult section of the manual, with no recognition as a separate category in the children's disorders section. Again, this is important because depression is a major precursor of suicide. If we do not recognize depression in children we are likely to underestimate their degree of suicidal risk.

A number of other factors combine to lead us to underestimate suicidal risk in children. Not the least of these are epidemiological researchers who, because the officially recognized suicide rates per 100,000 children are relatively low, tend to ignore the problem of children's suicide. For example, Shneidman (1976) states "... suicide rates for children under age 10 are negligible." Low yes, but negligible! Other factors related to our lack of cognizance of children's suicide include, but by no means are limited to: our general abhorrence of suicide and our particular desire to disavow children's suicide; the association between children's suicide and child abuse and parent's desire to cover-up the occurrence

of child abuse; and, the difficulty in discriminating between childhood accidents and suicide.

A premise which served as a rationale for the research reported in this paper is if one feels that suicide is an option when confronted with adverse or negative life circumstances then suicidal risk is increased. While this assumption is debatable, it served as a framework for the research project undertaken by the authors. Basically, we wanted to know at what ages and in what numbers children verbally report suicide as a possible choice when suffering adverse circumstances.

There are a number of practical and possibly ethical complications in regard to research on children's thinking regarding suicide. The researchers were sensitive to the possibility that interviews with children, where they would be directly enquired as to their opinions related to suicide, might lead to a situation where we introduce the concept of suicide as an option to the child. Therefore, a more indirect assessment approach was decided upon. This assessment approach is described in the methodology section of the paper.

A final note regarding the research reported in this paper, as previously mentioned, the research reported is part of a larger project related to children's ideation regarding suicide; however, the report which follows only relates to the responses of college students to hypothetical negative life circumstance scenarios. This limited part of our research is all that is reported because other components are still in the data collection or data analysis phases. We feel the research reported is important because it highlights certain myths concerning suicide, because it serves as a vehicle for exchanging information regarding the methodology of our larger research project and because the results obtained provide information relevant to how one segment (albeit, a limited and over-researched group) of our population reacts when considering people's reactions to negative life circumstances.

Method

Subjects

A total of 286 subjects participated in the study. The subjects were undergraduate college students enrolled in various psychology courses. One hundred and seventy three (173) females and 113 males provided data. One hundred and twenty (120) of the participants (61 females and 59 males) responded to the stimulus materials where the character was the same sex as the subject. The other 166 subjects (112 females and 54 males) responded to a story relating a negative life circumstance where the main character was of the opposite sex of the subject.

Instruments

Six stories, each of approximately equal length, describing a person in an aversive life circumstance were developed. Two stories described a teenager, two others focused on an elderly person and the last two described a character who was presented as being the same age as the respondent. The stories within each age group pair varied only according to the sex of the main character. Each scenario was followed by the question, "Can you think about three things _____ (the name of the character) might be thinking about doing?" Space was then provided for the subject's written response. Copies of the scenarios with male characters are attached as Appendix A.

Procedure

The questionnaires were administered to students in various psychology classes during the regular class period. The instruments were distributed so that half of the subjects received a scenario where the story character was the same sex as the subject. Additionally, the subjects were approximately equally divided as to whether they were responding to a character

who was a teenager, elderly person or person of the same age. After the subjects wrote their responses they were thanked for their cooperation and they were informed concerning the time and location of a debriefing session where the nature and goals of the research project would be explained to them.

Results

The subjects' responses were first categorized according to the sex of the respondent and then they were classified by the sex and age of the character in the story. These twelve groups were then assessed in regard to whether the respondent clearly projected suicidal ideation into the thinking of the character, whether the character was viewed as thinking thoughts related to his/her non-suicidal death or giving up and those responses where neither thoughts of suicide or death were communicated.

The following table summarizes the subjects' responses according to sex of respondent, sex of character, age of character and projected character ideation. It should be noted that the three thoughts projected onto the character were combined and viewed as a single response. Therefore, those responses categorized as projected suicidal ideation may or may not have also included the theme of death or giving up, those responses categorized as death did not include a theme of suicide in any of the three projected thoughts and those categorized as neutral contained neither themes of suicide or death.

Insert Table 1 here.

Next a Chi-square analysis was performed to determine the effect of sex of respondent on projection of suicidal ideation onto the characters. For this and all subsequent analyses those responses (again, for

Table 1

Male Subjects

Male character	Suicide		Death		Neutral	
	N	(%)	N	(%)	N	(%)
old	9	(47%)	7	(37%)	3	(16%)
teen	17	(89%)	0	(0%)	2	(11%)
same age	14	(67%)	3	(14%)	4	(19%)
Female character						
old	6	(35%)	7	(41%)	4	(24%)
teen	15	(75%)	0	(0%)	5	(25%)
same age	10	(59%)	2	(12%)	5	(29%)

Female Subjects

Male character	Suicide		Death		Neutral	
	N	(%)	N	(%)	N	(%)
old	17	(45%)	12	(32%)	9	(23%)
teen	30	(81%)	0	(0%)	7	(19%)
same age	19	(51%)	9	(24%)	9	(25%)
Female character						
old	4	(19%)	14	(67%)	3	(14%)
teen	15	(71%)	0	(0%)	6	(29%)
same age	12	(63%)	2	(11%)	5	(26%)

purposes of analysis a response is the three thoughts projected considered as a unity) where suicide was clearly indicated as a character's thought were compared to responses where suicide was not clearly indicated. That is neutral and indirect suicidal thoughts (giving up, dying, letting go, no longer caring, etc.) were combined and compared to responses where suicide was clearly projected onto the character (he/she is going to kill him/her self, going to hang himself, she is going to commit suicide, etc.). The result of the Chi-square for sex of respondent across all stories was nonsignificant (X^2 1.29, N = 286, df 1).

Next a Chi-square comparing the effect of age of the character upon subject response was run. The analysis was significant (X^2 34.08, N = 286, df 2, $p < .01$). Further analyses regarding age of the character revealed suicidal ideation was most likely projected onto the teenager compared to the elderly character (X^2 34.11, N = 192, df 1, $p < .01$) or the same age character (X^2 9.74, N = 191, df 1, $p < .01$).

Next a Chi-square analysis was performed for comparing the effect of sex of the story character upon projected suicidal ideation. This comparison was nonsignificant (X^2 1.85, N = 286, df 1).

Discussion

Perhaps the most important result of this research was that it demonstrated that the methodology was effective in eliciting responses which reflected suicidal ideation. As previously indicated, this research is part of a larger project designed to determine at what age or developmental level children's responses to adverse life circumstances reflect adult patterns in regard to projected suicidal ideation. Given that 59% of the subjects gave responses which reflected direct indications of suicidal ideation and an additional 20% incorporated themes of death or giving up without mentioning suicide, the instru-

ment has clear applicability for the assessment of projected suicidal ideation. Further, each of the individual scenarios was effective in eliciting projected suicidal ideation. The range and number of subjects responding with projected suicidal ideation or themes of death can be determined by examining Table 1. Additional evidence of the usefulness of the instruments has been obtained from a parallel research study, not reported in this paper, which shows that young children respond to the stories with themes that are quantitatively and qualitatively different from the subjects of this study.

A second result of importance relates to the finding that subjects differentially projected suicidal ideation onto the characters based on the characters' ages. This result must be interpreted with caution because the effects of age-of-character versus thematic content of the scenario cannot be separated. This is a major limitation to the study as currently reported. However, as previously indicated, the purpose of the study was as much to test a research methodology as to determine what specific factors are associated with projected suicidal ideation. Still, the result regarding age-of-character/theme-of-scenario does have importance as it currently stands. That is, the scenario for the elderly person was written to reflect maximum suicidal risk; whereas, the scenario for the teenager (the character/scenario for which suicidal ideation was most frequently projected) represented a person at lower risk for committing suicide. Still, one can argue that teenagers experiencing interpersonal and social problems are more likely to attempt suicide, even though elderly persons experiencing material loss, loneliness, and health problems are more likely to commit suicide. Therefore, the subjects may have been accurate when they projected more suicidal ideation into the scenario for the teenager. Or alternatively,

the elderly person may be more likely to commit and/or attempt suicide, but the teenager still be more likely to contemplate or think about it.

Each of the preceding questions is subject to empirical verification. While the current research does not answer them, it does open the door to their examination. That is, it is possible by varying the methodology to determine the relative impact of age of the character versus thematic content of the scenario, and additional research can be undertaken to more directly and more accurately assess suicidal ideation in the adult population. These findings can be in turn compared in regard to the degree that they match projected suicidal ideation.

Again, one must keep in mind that a more indirect assessment technique was being utilized because our primary interest is in chidren's suicide and in this regard more direct assessment methods carry significant risk.

Despite the preceding limitations, the fact that elderly persons were viewed as having less suicidal ideation is of interest. Perhaps of major importance is the possibility that people underestimate and tend not to be cognizant of the suicidal risk of elderly persons as compared to younger persons. This conclusion has significant practical implications and deserves additional research attention.

While overall the sex of the character did not obtain statistical significance, there are indications that this is an area worthy of additional study. For female subjects there was a significant difference in their projection of suicidal ideation onto the elderly characters based on the sex of the character (X^2 3.89, N = 59, df 1, $p < .01$). This result must be interpreted with caution based on a lack of overall sex of character effect. Still, if this result replicates, it has meaning in regard to how females view suicide risk in the elderly. Basically,

our subjects appeared willing to recognize that an elderly male would contemplate suicide, but when assessing the thoughts of an elderly female, in identical circumstances, they were unlikely to project suicidal ideation into the thinking of the character. This may mean when confronted with one's grandmother or some other elderly female who is experiencing adverse life circumstances, one is less likely to recognize suicidal risk compared to when it is a male suffering the negative situation.

One other factor regarding the lack of a sex of character effect is of interest. That is, there were no consistent trends which related to risk to commit suicide, risk to attempt suicide, and projected suicidal ideation. It is difficult to interpret whether this represents the subjects' lack of recognition of who is at most risk to commit and/or attempt suicide or whether it represents personal and/or cultural stereotypes. In any case, it is an area which deserves additional research.

One last aspect of the results needs to be recognized. This facet relates to qualitative differences between the responses of male and female subjects. Of greatest interest here was the impression that females consistently identified more prosocial and generally more effective methods for dealing with the adverse events than male subjects. For example, females more often identified the characters as turning to friends or family, seeking religious counsel or prayer, persevering despite the doctor's negative prognosis, reflecting on past coping strategies, salvaging what can be saved, checking insurance coverage, dealing with the future one day at a time, keeping busy, finding a hobby, getting physical therapy, being grateful they are alive, developing a new lifestyle, utilizing a prosthesis, utilizing their mind, finding a way of overcoming, using what resources they have, etc. While a number of

males identified similar proactive responses they were offered less frequently and there appeared to be a higher frequency of projected ideation which would be ineffective in solving the problem. Some examples follow: run away, take drugs, become a criminal, give up, withdraw, become angry, etc. Again these responses were also identified by female respondents, but at a much lower frequency. In future research it is intended that a rating system will be developed in order to determine whether these apparent qualitative differences reach statistical signigicance.

A last note regarding the qualitative assessment of the responses relates to the frequency that subject's projections indicated the characters were considering obtaining counseling or therapy. Despite the fact that nearly sixty percent of the respondents indicated that the character was considering suicide less than 1% stated that the character was considering getting any kind of counseling or therapy and factoring out those responses which related to talking to a friend or relative less than 5% had even a general statement such as "get some kind of help" which might be interpreted as seeking professional assistance. This finding indicates that consideration of professional assistance is not a high priority when persons project what an individual's response would be when confronted with negative life circumstances.

Conclusions

The preceding research describes a methodology useful for understanding suicidal ideation. It should prove of particular value when applied to the development of information regarding suicidal ideation of young children.

The results showed a lack of concurrence between risk for suicide and projected suicidal ideation. There is a need for additional research

to determine whether this reflects misconceptions regarding suicidal risk or is an accurate reflection as to the degree that the persons from different age groups or those experiencing various adverse life circumstances are more or less likely to think about suicide independent of their risk to commit suicide.

There were findings that professionals should consider the differential response of males and females when they experience adverse life circumstances. Also, the infrequency of projected ideation related to seeking professional help indicates that work needs to be done to make therapy and counseling services more physically and psychologically accessable to persons experiencing adverse life circumstances.

References

Ausubel, D.P. & Sullivan, E.V. Theory and Problems of Child Development 2nd ed. Grune & Stratton: N.Y., N.Y., 1970

Diagnostic and Statistical Manual of Mental Diseases, 3rd edition, American Psychiatric Association, Washington, D.C., 1980

Rochlin, G. The loss complex. Journal of the American Psychoanalytic Association vol 7, 1959, 299.

Shneidman, E.S. A review of recent developments. Psychiatric Annals vol 6 (11), 1976, 67-91.

Toolan, J.M. Depression and suicide in children: An overview. American Journal of Psychotherapy, vol 35 (3), 1981, 311-322.

W.H.O., World Health Statistics Annual, Vol I, Geneva, 1975

Appendix A

AGE____ SEX_____ DATE_____ SCHOOL_____

MAJOR_____ GRADE/CLASSIFICATION LEVEL_____

Mr. Johnson is an old, old man. He's been very sick with cancer and he's in the hospital right now. The doctors are not sure he's going to get better. For many years this old man has been living alone. Right before he was taken to the hospital, his whole house and everything he owned burned down.

Can you think about three things that Mr. Johnson might be thinking about doing?

1.

2.

3.

AGE____ SEX_____ DATE_____ SCHOOL_____

MAJOR_____ GRADE/CLASSIFICATION_____

Rich is a boy about your age who was riding his bike one day when a truck hit him. Now Rich has to stay in bed all the time because he can only move his head. The doctors say he'll never walk or be able to play again. Rich is very sad. He used to have a lot of friends, but now that he can't move they don't come over any more.

Can you think about three things that Rich might be thinking about doing?

1.

2.

3.

AGE_____ SEX_____ DATE_____ SCHOOL_____

MAJOR_____ GRADE/CLASSIFICATION LEVEL_____

Bobby is a very sad teenager. His parents are always fighting--yelling and screaming at each other--and Bobby hates to spend any time at home. Last week Bobby was caught stealing and now he is in trouble with the law. He's doing poorly in school, has no friends and is always feeling bad and unhappy.

Can you think about three things that Bobby might be thinking about doing?

1.

2.

3.